

**A SUBSTITUTE ORDINANCE BY
TRANSPORTATION COMMITTEE**

A SUBSTITUTE ORDINANCE AUTHORIZING THE MAYOR OR HIS DESIGNEE TO INCREASE THE AMBULANCE TRANSPORTATION FEES TO \$1,300.00 PLUS \$15.00 PER MILE FOR THE PURPOSE OF TRANSPORTATION SERVICES RENDERED BY AIRPORT FIRE MEDICAL UNITS AT HARTSFIELD JACKSON ATLANTA INTERNATIONAL AIRPORT AND FOR OTHER PURPOSES.

WHEREAS, the City of Atlanta (“City”) owns and operates Hartsfield-Jackson Atlanta International Airport (HJAIA); and

WHEREAS, the Atlanta Fire Rescue Department (AFRD) provides fire, medical, hazardous materials, technical rescue, and other responses to HJAIA; and

WHEREAS, the AFRD Advance Life Support Medical Units provide Emergency Medical Services (EMS) coverage and transportation for HJAIA; and

WHEREAS, currently the AFRD EMS transportation fee is a flat rate of \$50.00 per hospital transport; and

WHEREAS, the current EMS transportation fees were established 30 years ago and has not been adjusted to existing cost recovery values; and

WHEREAS, the AFRD is imposing a flat rate fee increase to \$1,300.00 plus \$15.00 per mile per EMS transport from HJAIA to area hospitals; and

WHEREAS, the average transportation fees for EMS transportations in the Metro Atlanta region is \$900.00 per transport plus additional mileage charges.

THE CITY COUNCIL OF THE CITY OF ATLANTA, GEORGIA, HEREBY ORDAINED, as follows:

SECTION 1: The Mayor or his designee is hereby authorized to increase the ambulance transportation fees to \$1,300.00 plus \$15.00 per mile for the purpose of transportation services rendered by the Airport Fire Medical Units at Hartsfield-Jackson International Airport.

SECTION 2: Revenues for services will continue to be deposited in Fund 5501, Account 0000023453255 Fire Service Ambulance.

SECTION 3: That all ordinances or parts of ordinances in conflict with this ordinance are hereby waived.

AN ORDINANCE BY

THE TRANSPORTATION COMMITTEE

AN ORDINANCE AUTHORIZING THE MAYOR OR HIS DESIGNEE TO INCREASE THE AMBULANCE TRANSPORTATION FEES TO \$700.00 SEVEN-HUNDRED DOLLARS AND ZERO CENTS FOR THE PURPOSE OF TRANSPORTATION SERVICES RENDERED BY AIRPORT FIRE MEDICAL UNITS AT HARTSFIELD JACKSON ATLANTA INTERNATIONAL AIRPORT AND FOR OTHER PURPOSES.

WHEREAS, the City of Atlanta ("City") owns and operates Hartsfield-Jackson Atlanta International Airport (HJIA); and

WHEREAS, the Atlanta Fire Rescue Department (AFRD) provides fire, medical, hazardous materials, technical rescue, and other responses to HJIA; and

WHEREAS, the AFRD Advance Life Support Medical Units provide Emergency Medical Services (EMS) coverage and transportation for HJIA; and

WHEREAS, currently the AFRD EMS transportation fee is a flat rate of \$50.00 fifty dollars and zero cents per hospital transport; and

WHEREAS, the current EMS transportation fees were established 30 years ago and has not been adjusted to existing cost recovery values; and

WHEREAS, the AFRD is imposing a flat rate fee increase to \$700.00 seven-hundred dollars and zero cents per EMS transport from HJIA to area hospitals; and

WHEREAS, the average transportation fees for EMS transportations in the Metro Atlanta region is \$900.00 nine-hundred dollars per transport plus additional mileage charges.

THE CITY COUNCIL OF THE CITY OF ATLANTA, GEORGIA, HEREBY ORDAINS, as follows:

SECTION 1: The Mayor or his designee is hereby authorized to increase the ambulance transportation fees to \$700.00 for the purpose of transportation services rendered by the Airport Fire Medical Units at Hartsfield-Jackson International Airport

SECTION 2: Revenues for services will continue to be deposited in Fund 5501, Account 0000023453255 Fire Service Ambulance

SECTION 3: That all ordinances or parts of ordinances in conflict herewith are hereby waived to the extent of the conflict

RCS# 210
5/03/10
2:28 PM

Atlanta City Council

REGULAR SESSION

CONSENT II

EXCEPT 10-O-0739,10-O-0740

REFER

YEAS: 11
NAYS: 0
ABSTENTIONS: 0
NOT VOTING: 3
EXCUSED: 0
ABSENT 2

NV Smith	Y Archibong	Y Moore	B Bond
Y Hall	Y Wan	Y Martin	NV Watson
Y Young	Y Shook	Y Bottoms	Y Willis
B Winslow	Y Adrean	Y Sheperd	NV Mitchell

CONSENT II

Part II: Legislative White Paper: (This portion of the Legislative Request Form will be shared with City Council members and staff)

A. To be completed by Legislative Counsel:

Committee of Purview: Transportation Committee

Caption:

AN ORDINANCE AUTHORIZING THE MAYOR OR HIS DESIGNEE TO INCREASE THE AMBULANCE TRANSPORTATION FEES TO \$700.00 SEVEN-HUNDRED DOLLARS AND ZERO CENTS FOR THE PURPOSE OF TRANSPORTATION SERVICES RENDERED BY AIRPORT FIRE MEDICAL UNITS AT HARTSFIELD JACKSON ATLANTA INTERNATIONAL AIRPORT AND FOR OTHER PURPOSES.

Council Meeting Date: March 30, 2010

Requesting Dept.: The Department of Fire Rescue

FAC Confirmed by:

B. To be completed by the department:

1. Please provide a summary of the purpose of this legislation (Justification Statement).

Example: The purpose of this legislation is to anticipate funds from a local assistance grant to purchase child safety seats.

The purpose of this legislation is to increase fees for transportation to 700.00 for transportation services provided by the Department of Fire Rescue Airport Medical Units at Hartsfield-Jackson Atlanta International Airport.

2. Please provide background information regarding this legislation.

Example: The task force of homelessness conducted a study regarding homelessness, its impact and consequences on the City. This resolution reflects the Mayor's desire to open a twenty-four hour center that will respond to the needs of the homelessness in Atlanta.

The department of Fire Rescue provides Emergency Medical Services (EMS) and coverage at Hartsfield-Jackson Atlanta International Airport. The exiting flat rate of \$50.00 per transport was established 30 years ago and has not been adjusted to exiting cost recovery rates. The average market rate within the Metro Atlanta region for EMS transportations are 900.00 plus additional fees for mileage.

3. If Applicable/Known:

(a) **Contract Type (e.g. Professional Services, Construction Agreement, etc):** NA

(b) **Source Selection:** NA

(c) Bids/Proposals Due: NA

(d) Invitations Issued: NA

(e) Number of Bids: NA

(f) Proposals Received: NA

(g) Bidders/Proponents: NA

(h) Term of Contract: NA

4. Fund Account Center (*Ex. Name and number*): NA

Fund: 5501 Account: 0000023453255 Center: _____

5. Source of Funds: *Example: Local Assistance Grant* NA

6. Fiscal Impact: NA

Example: This legislation will result in a reduction in the amount of _____ to Fund Account Center Number _____.

7. Method of Cost Recovery:

Any and all revenue recovered under this legislation will continue to support Fund 5501, Account 0000023453255

Examples:

- a. *Revenues generated from the permits required under this legislation will be used to fund the personnel needed to carry out the permitting process.*
- b. *Money obtained from a local assistance grant will be used to cover the costs of this Summer Food Program.*

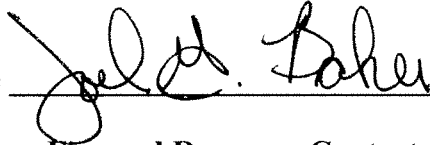
This Legislative Request Form Was Prepared By: Wilmond Meadows

TRANSMITTAL FORM FOR LEGISLATION

TO: MAYOR'S OFFICE

ATTN: CANDACE BYRD

Commissioner Signature



Originating Department: Fire and Rescue Contact (name) Wilmond Meadows

Committee(s) of Purview: Transportation Committee

Committee Deadline: _____

Committee Meeting Date(s): 3/30/10 Full Council Date: 4/19/10

CAPTION

AN RESOLUTION AUTHORIZING THE MAYOR OR HIS DESIGNEE TO INCREASE THE AMBULANCE TRANSPORTATION FEES TO \$700.00 SEVEN-HUNDRED DOLLARS AND ZERO CENTS FOR THE PURPOSE OF TRANSPORTATION SERVICES RENDERED BY AIRPORT FIRE MEDICAL UNITS AT HARTSFIELD JACKSON ATLANTA INTERNATIONAL AIRPORT AND FOR OTHER PURPOSES.

BACKGROUND/PURPOSE/DISCUSSION:

The department of Fire Rescue provides Emergency Medical Services (EMS) and coverage at Hartsfield-Jackson Atlanta International Airport. The exiting flat rate of \$50.00 per transport was established 30 years ago and has not been adjusted to exiting cost recovery rates. The average market rate within the Metro Atlanta region for EMS transportations are 900.00 plus additional fees for mileage.

FINANCIAL IMPACT (if any): NA

Mayor's Staff Only

Received by Mayor's Office: _____

(date)

Reviewed by: _____

(date)

Submitted to Council: _____

(date)